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To: USPTO Issue Fee Payments

From: John A. Galbreath

Company:

Fax Number: 1-703-746-4000

Fax Number: 1-410-666-7274

#### Message:

6 April 2005

Dear Sir or Madam:

Please process the attached issue fee payment in Appl. # 09/593,993 as soon as possible. Note that a Comment on the Examiner's Statement of Reasons for Allowance is also attached. If you have any questions, just give me a call at 410-628-7770.

Best regards,

John Galbreath  
Reg. # 46,718

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**PART B - FEE(S) TRANSMITTAL**Complete and send this form, together with applicable fee(s), to: **Mail****Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
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(703) 746-4000**or **Fax**

**INSTRUCTIONS:** This form should be used for transmitting the **ISSUE FEE** and **PUBLICATION FEE** (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by: (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address.)

24271 7590 01/11/2005

**JOHN ALEXANDER GALBREATH  
2516 CHESTNUT WOODS CT  
REISTERSTOWN, MD 21136**

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

<i>John A. Galbreath</i>	(Depositor's name)
<i>John A. Galbreath</i>	(Signature)
<i>04/06/2005</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/593,993	06/14/2000	Roy Shkedi	JMB-2-0005	8221

TITLE OF INVENTION: DESCRIPTIVE-PROFILE MERCANTILE METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	04/11/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
OUELLETTE, JONATHAN P	3629	705-001000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

*Galbreath Law Offices, PC*

*John A. Galbreath*

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

*Almond Net, Inc.*

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

*New York, NY*Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

- ☐ check in the amount of the fee(s) is enclosed.
- ☒ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number \_\_\_\_\_ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37-CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*John A. Galbreath*

Date

*4/5/05*

Typed or printed name

*John A. Galbreath*

Registration No.

*46718*

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